

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

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 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00573154       </div>
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>RIGHT STRATEGIES, LLC</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 11 / 18 / 2015</div> </div>		
Mailing Address 3176 SUMMIT SQUARE DR, STE B-10			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1340.62</div>		
City OAKTON	State VA	Zip Code 22124	<b>Transaction ID : SE24.1139</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 11 / 18 / 2015</div> </div>		
Purpose of Expenditure ADVERTISING - ONLINE		Category/Type	Name of Federal Candidate CARLY FIORINA		
		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>AR</u>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">15430.71</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee <b>RIGHT STRATEGIES, LLC</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 11 / 18 / 2015</div> </div>		
Mailing Address 3176 SUMMIT SQUARE DR, STE B-10			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1500.00</div>		
City OAKTON	State VA	Zip Code 22124	<b>Transaction ID : SE24.1200</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 11 / 18 / 2015</div> </div>		
Purpose of Expenditure ADVERTISING - ONLINE		Category/Type	Name of Federal Candidate CARLY FIORINA		
		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>AR</u>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">15430.71</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">2840.62</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Chris M. Marston

[Electronically Filed]

Date

MM / DD / YYYY  
12 / 04 / 2015

Signature